

WELLINGTON SCL CRITICAL ACTION LIMITS

WELLINGTON
SCL



TEST NAME	UNITS	FAX LIMITS (Community and Kenepuru)		PHONE LIMITS		COMMENTS	
		LOWER	UPPER	LOWER	UPPER		
BIOCHEMISTRY							
Sodium	mmol/L	<125		<120	>155	Results that are stable at these levels and are accompanied by clinical information supporting these levels may be faxed instead of phoned.	
Potassium	mmol/L	3.5 (community)	>5.6 (community)	<3.0	>6.0	Age of sample, presence of haemolysis and time elapsed between collection and separation and patient with end stage renal failure on renal dialysis are taken into consideration when evaluating these results and may influence whether results are phoned or faxed	
Creatinine	µmol/L		>300			At first presentation.	
Urea	mmol/L		>20			Results will be faxed if urea is >20 mmol/L with creatinine <160 µmol/L at first presentation.	
Uric Acid	mmol/L		Preg >0.34		Preg >0.45		
Adjusted Calcium	mmol/L		>2.80 (community)	<1.80	>3.00	Results that are stable at these levels and are accompanied by clinical information supporting these levels may be faxed instead of phoned.	
Magnesium	mmol/L	<0.60		<0.50	>2.0		
Pancreatic Amylase	IU/L		>60		>150	Results that are stable at these levels may be faxed instead of phoned.	
Phosphate	mmol/L			<0.5	>3.0	Age of sample and time elapsed between collection and separation are taken into consideration when evaluating these results and may influence whether results are phoned or faxed.	
Total Bilirubin — adults	µmol/L		>400			At first presentation. As significant haemolysis may cause underestimation of bilirubin, results falling outside these limits may be faxed.	
Total Bilirubin — paediatric patients	µmol/L	All Paediatric results <250 are faxed		All paediatric results ≥250 are phoned		As significant haemolysis may cause underestimation of bilirubin, results falling outside these limits may be phoned.	
ALT (Limits apply to Community and Kenepuru patients))	IU/L		>1000		>3000	ALT >1000 Faxed at first presentation. ALT >3000 along with Total Bilirubin >100 µmol/L will always be phoned.	
AST (Limits apply to Community and Kenepuru patients))	IU/L		>1000		>3000	AST >1000 Faxed at first presentation. AST >3000 along with Total Bilirubin >100 µmol/L will always be phoned.	
Carbamazepine	µmol/L				>50		
Hs Troponin (Limits apply to Community and Kenepuru)	ng/L	All results are faxed				≥14	As significant haemolysis may cause underestimation of Hs Troponin, results falling outside these limits may be phoned.
Glucose	mmol/L		>25 (Patient not known to have diabetes) >30 (Patient known to have diabetes)	≤2.5	>30 (Patient not known to have diabetes) >35 (Patient known to have diabetes)		
Lithium	mmol/L	1.0 - 1.2			>1.2		
Phenytoin	µmol/L	>80			>90		
Valproate	µmol/L	>700			>800		
Cortisol	nmol/L	<150		<30 if not on Dexamethasone		Cortisol faxed <150. Result is phoned through <30 Not known to be on Dexamethasone	
Paracetamol	µmol/L					All detectable on first presentation	
Salicylate	mmol/L					All detectable on first presentation	
Tobramycin					>10		
Vancomycin					> 25		
Digoxin	nmol/L				≥2.0		
Blood Gas				pH ≤ 7.1 (hospital)	pH ≥ 7.55 (hospital) Lactate > 5 (hospital)	Hospital patients phoned if pH <7.1 ≥ 7.55 Lactate > 5	
Ethanol	mmol/L					>40	
FT4	pmol/L				>30	With suppressed TSH on first presentation	
Gentamicin	mg/L				>2.0		
Ammonia	µmol/L				>106		

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		LOWER	UPPER	LOWER	UPPPER	
HAEMATOLOGY						
WBC	x 10 ⁹ /L			N/A	>30 (Community & Outpatients) >50 (Hospital)	Applies to all patients except Haematology / Medical Oncology patients.
HB	g/L			< 80 or < 50 below reference range (0-3yrs) < 70 (Hospital patients > 3yrs, Haematology or Medical Oncology patients) < 80 (Community & Outpatients > 3yrs)	> 20 above reference range (0-3yrs) > 200 (>3yrs)	As a number of the Hb critical ranges are specific to individual age related ranges, please refer to CBC age related ranges in the WSCL Pathology Test Guide, for reference. Note: The only result phoned for Haematology / Medical Oncology patients is Hb <70.
HCT	Ratio			N/A	> 0.56 (Female >3yrs) > 0.60 (Male >3yrs)	Applies to all patients except Haematology / Medical Oncology patients.
PLT	x 10 ⁹ /L			< 80 (Pregnant Patients) < 10 (Known ITP Patients, Haematology or Medical Oncology patients) < 20 (All other patients)	> 1000 (NOT post-op patients within the last 14 days or known ET patients)	Note: The only result phoned for Haematology / Medical Oncology patients is Platelets <10.
Neutrophils	x 10 ⁹ /L			< 0.5	> 20 (Community & Outpatients ONLY)	Applies to all patients except Haematology / Medical Oncology patients.
INR	Ratio	All community results are faxed			> 5.0	Must be phoned regardless of the previous result.
APTT	seconds				> 40 (if patient is not on anticoagulants) >120 (if patient is on anticoagulants)	
FIB	g/L			< 1.0		
D Dimer	ng/mL				> 500 (NOT Emergency Department)	Must be phoned regardless of the previous result.
ESR	mm/hr			>100 (with any clinical details which could suggest possible temporal arthritis)		
MICROBIOLOGY / MOLECULAR						
Sample Type	Test	Critical Result Phone Action				
CSF positive Gram stain	Cell Count and Gram Stain	Results that will be phoned through for within 1hr of the result becoming available.				
Joint fluids positive Gram stain	Gram Stain					
Meningococcal PCR positive	PCR Result					